2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

FILED Jan 27, 2006 08:00 AN DOCUMENT # P03000079829 **Secretary of State** 1. Entity Name MUNDO ENVIOS INC. Principal Place of Business Mailing Address 5454 HOFFNER AVE., STE. 104 5454 HOFFNER AVE., STE. 104 ORLANDO, FL 32812 ORLANDO, FL 32812 01242006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0405341 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TRUJILLO, STELLA PRES DO NOT WRITE 5454 HOFFNER RD SUITE 104 ORLANDO, FL 32812 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. (NOTE. Registered Agent signature required when reinstating) 11000000402537 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be 02/03/06-80012-005 150.00 Π Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS **PRES** TITLE TRUJILLO, STELLA NAME 5454 HOFFNER RD SUITE 104 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32812 TITLE NAME RAMIREZ, SANTIAGO STREET ADDRESS 5454 HOFFNER RD SUITE 104 CITY-ST-ZIP ORLANDO, FL 32812 TITLE RAMIREZ, MARIA A NAME STREET ADDRESS 5454 HOFFNER RD SUITE 104 DO NOT WRITE CITY-ST-ZIP ORLANDO, FL 32812 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-TIP UTLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	Stella tovillo	. 1.	24-		407-3564
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	Dalé	Davrime	Phone #